

**PETITION STATEMENT**

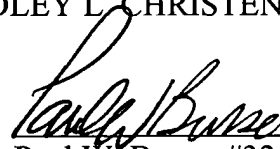
- On October 23, 2001, a new patent application entitled "COATED POTASSIUM CHLORIDE GRANULES AND TABLETS" was sent to the USPTO via Express Mail pursuant to 37 C.F.R. § 1.10.
- To the best of Applicants' knowledge, no return postcard or filing receipt has been received by Applicants to date.
- Enclosed are copies of the complete patent application, including a transmittal letter, as well as a copy of the Express Mail Label having an October 23, 2001 date stamp. Please note that Express Mail No. EL705312273US was placed on the transmittal letter.
- Pursuant to 37 C.F.R. § 1.10, please provide us with a filing receipt having a filing date of **October 23, 2001**.

No fee is believed to be necessary for this petition. Should any fee be required, the Commissioner is authorized to charge our Deposit Account No. 06-0029 and is requested to notify us of the same.

Respectfully Submitted,

BRADLEY L. CHRISTENSON et al.

By:

  
Paul W. Busse, #32,403  
FAEGRE & BENSON LLP  
2200 Wells Fargo Center  
90 South Seventh Street  
Minneapolis, MN 55402-3901  
612/766-7046

Dated: January 11, 2002  
M2:20435335.01

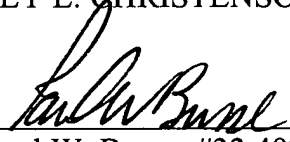
- Credit Card Payment form in the amount of \$512.00 for the Small Entity Filing Fee and Assignment Recordation fee; and
- Postcard  
A self-addressed return postcard in accordance with M.P.E.P. Section 503 itemizing all of the above-referenced documents filed with the United States Patent and Trademark Office.

In the event the amount submitted herewith is insufficient with respect to this refiling, the Commissioner is hereby authorized to charge the balance needed to our Deposit Account No. 06-0029 and is requested to notify us of the same.

Respectfully Submitted,

BRADLEY L. CHRISTENSON et al.

By:

  
Paul W. Busse, #32,403  
FAEGRE & BENSON LLP  
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90 South Seventh Street  
Minneapolis, MN 55402-3901  
612/766-7046

Dated: January 11, 2002

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<input type="checkbox"/>	Assignment			\$ <u>40</u>							
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<input type="checkbox"/>	Overpayment	Credit Deposit A/C #:									
<input type="checkbox"/>	Duplicate Payment	9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"> <tr> <td>0</td><td>6</td><td>--</td><td>0</td><td>0</td><td>2</td><td>9</td> </tr> </table>			0	6	--	0	0	2	9
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<input type="checkbox"/>	No Fee Due (Explanation):										
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SIGNATURE: <u>[Signature]</u>		PHONE: <u>202-5106</u>									
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